

CLAIMS ONLY							Application Number		Filing Date			
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51		/			
2		/					52	/				
3		/					53		/			
4		/					54		/			
5		/					55		/			
6		/					56	/				
7		/					57		/			
8		/					58	/				
9		/					59	/				
10	/						60	/				
11	/						61		/			
12		/					62	/				
13		/					63	/				
14		/					64		/			
15		/					65		/			
16		/					66		/			
17		/					67		/			
18	/						68		/			
19	/						69		/			
20	/						70		/			
21	/						71		/			
22	/						72		/			
23	/						73		/			
24	/						74		/			
25		/					75	/				
26		/					76		/			
27		/					77		/			
28	/						78		/			
29		/					79		/			
30		/					80	/				
31		/					81		/			
32		/					82		/			
33	/						83	/				
34		/					84		/			
35		/					85		/			
36	/						86		/			
37	/						87	/				
38		/					88		/			
39	/						89		/			
40	/						90		/			
41	/						91		/			
42		/					92		/			
43	/						93		/			
44	/						94		/			
45		/					95		/			
46	/						96		/			
47		/					97		/			
48		/					98		/			
49		/					99		/			
50		/					100		/			
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					

